	COST REIMBURSABLE						-	PAID BY			
(Department, bureau, or establishment)							_				
Voucher prepared at(Give place and date)							Encl # 2				
THE UNITED STATES, Dr., Payee's Account No							DP5-3551				
(Payee)							-	COPY / OF 2			
		·						Marie San Commission	A CONTRACTOR OF THE PROPERTY O		
	(Add	dress) (City)			State)		UNIT PRICE		AMOUNT		
No. and Date of Order	Date of Delivery or Service	(Enter description.	tem number of contract or Federal other information deemed necessar		QUANTITY				Dollars C		
		Cost							(1,467	3	
		0020							• •		
AYMENT:											
Complete											
Partial 🔲 Final 🔲		I lae c	ontinuation sheet(s) if ne	ressarv							
nipped from	1	to	Weight	Government E	3/L No.		·	Total	(1,467		
	above bill is correc	t and just and that pays	nent has not been receiv	ved.		ee must NC			, ,		
TOTHR		(Sign original only)				ces				-	
(101111)		(Orgin original only)								1	
Date 8/19/	/58 *Pavee		te certificate is made by payee on a	tanhad bill or bills)					6.11	-	
_					Amou	int verified; ature or init	correct fo	r	(1,46)	/	
Per L Contract No.	0-101	Date	Reg. No			ature or min		Invoice Rec'		===	
	11-101				*********						
		I certify that this accoun	it is confect and proper								
	† Approved for \$SIGN				†(Authorized Certifying Officer)						
Approved for \$		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	ORIGINAL ONLY	Title							
			•								
Ву				Data							
Ву		UIC FARM MIST RE FYFCIITEI	WHEN PURCHASES ARE MAD								
Ву	THE REVERSE OF T	HIS FORM MUST BE EXECUTED		e or services sec	URED WITH	OUT WRITTEN	AGREEMENT	IN ANY FORM			

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Shut_

8/10/58 THE RAMO-WOOLDRIDGE CORPORATION WEEKLY DET DISTR ACCOUNTS PAYABLE FORM STL - 660 PAYMENT DATE BATCH INVOICE PURCHASE CHECK Vendor GROSS NET AMOUNT ORDER No. Mo. Day Yr. Account M.J.O. S.D. 3 50 25 28 00 12501 5092 08 08 08 8 3562 46338 08 11 233

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